

FEC FORM 3L

SECRETARY OF THE SENATE

11 FEB 18 PM 3:24


REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs

1. NAME OF COMMITTEE (in full)		USE FEC MAILING LABEL OR TYPE OR PRINT		Example: If typing, type over the lines	
DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE					
ADDRESS (number and street) 120 Maryland Ave. NE					
Check if different than previously reported. (ACC)		Washington	DC	20002	
		CITY	STATE	ZIP CODE	
2. FEC IDENTIFICATION NUMBER		3. IS THIS REPORT		4. STATE DISTRICT	
C00042366		X NEW (N) OR AMENDED (A)		DC	
5. TYPE OF REPORT (Choose One)					
(a) Quarterly Reports:					
April 15 Quarterly Report (Q1)		(b) Monthly X Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)			
July 15 Quarterly Report (Q2) and/or Semi-annual Report		Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)			
October 15 Quarterly Report (Q3)		Apr 20 (M4) Jul 20 (M7) and/or Semi-annual R report Oct 20 (M10) Jan 31 (YE) and/or Semi-annual Report			
January 31 Year-End Report (YE) and/or Semi-annual Report		(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Run off (12R) This report also covers the semi-annual period			
July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report		Special (12S) Convention (12C) Election on in the State of See Line 6(b)			
		(c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) This report also covers the semi-annual period			
		Election on in the State of See Line 6(b)			
6. Covering Period(s)					
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period		(b) Semi-annual Covered Period			
01 01 2011 through 01 31 2011		and/or January 1 - June 30 July 1 - December 31			
7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs					
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period		(b) Semi-annual Covered Period			
287000.00		.00			

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Darlene Setter

Signature of Treasurer



Date 02 18 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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